



JAB & GAB



The Wyoming Immunization Program Newsletter



And The Sharp Shooter Award Goes To...

Cheyenne-Laramie County Health Department is the second recipient of the "Sharp Shooter" award based on their concentrated efforts to improve adolescent immunizations.

In an attempt to increase vaccine uptake among adolescents, Cheyenne-Laramie County Health Department collaborated with school nurses in Laramie County School

District #1 to provide free immunizations to students on school grounds in their Mobile Response Unit (MRU). Students were offered TDaP and MCV4 during these on-site immunization clinics.

Cheyenne-Laramie County Health Department staff went to local elementary schools in the spring in order to ensure that students entering the 7th grade in the fall were up-to-date on their necessary immunizations, as well as offer meningococcal vaccine for those who opted to receive it.

As a result of this outreach effort to adolescents, 581 6th graders who attend school in Laramie County School District #1 received Tdap and/or MCV4 immunizations.

Cheyenne-Laramie County Health Department also plans on offering influenza vaccine to the schools this fall in order to increase flu vaccine uptake among children.

Please join the Wyoming Immunization Program in congratulating Cheyenne-Laramie County Health Department for their efforts in ensuring that adolescents are up-to-date on their required and recommended immunizations. We appreciate all you do to ensure that children in Wyoming are protected against vaccine-preventable diseases!

Honorable Mention: Albany County Public Health



Thank you for your commitment to ensuring the citizens and providers in your community are aware of the importance of immunizations. A job well done!

Wyoming Department of Health

JAB & GAB

Volume 4, Issue 10
October, 2008

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***Don't forget to check your email
for communication from us!**

**FY!! The JAB & GAB is
posted on the
www.immunizewyoming.com
website every month.**



World of the Vaccine Office By Randy DeBerry

Flu Order Update

The first flu order of the 2008-2009 season was placed on September 17, 2008. This order was not a full order because as of this date the WIP program had only received 31% of its allocated flu vaccine. Specifically Fluzone .25 PF had been very slow arriving at McKesson as only 9% of WIP's allocation has arrived. As of the writing of this newsletter, we received a great deal more of our allocated flu vaccine, and it will be arriving to your offices soon. Of note, providers' pre-book requests were for far more FluMist than was allocated to WIP by CDC. As such, providers whose FluMist pre-booking request that cannot be honored will be contacted to see what available flu vaccine they would like to substitute for their requested doses of FluMist. If you have determined that you do not want FluMist you pre-booked, please call the Vaccine Manager immediately so that we can make that available to other providers.

ActHIB Shortages

Current ActHIB allocations to WIP are not sufficient to meet the state's demand. The demand for ActHIB in the September 2008 order was 1545 doses, but the state's allocation was only 1200. ActHIB orders across the board needed to be reduced in order to keep ActHIB orders within the state's allocation limits. The ActHIB shortage is expected to continue for the foreseeable future. For example, our recently released ActHIB allocation for October 2008 is only 900 doses. We will do our best to accommodate needs, but may not be capable of meeting demands until the shortage is no longer an issue.

New Forms on the Way

New Doses Administered and Current Inventory forms will be distributed to WIP providers within this newsletter and were distributed by fax last week. They are also available online. The new forms were necessary because of the addition of Pentacel to the state's vaccine formulary. Please utilize these new forms in the future.

Special Clinic Order Forms

Vaccine doses requested by providers via Special Clinic Order Forms (SCOF) will be ordered in addition to the provider's regular replenishment order. For example, if a provider turns in a SCOF for 30 doses of MCV4, and their replenishment order for MCV4 is 20 doses, then the total order amount for MCV4 they will receive would be 50 doses. If the amounts of vaccine doses listed on the SCOF reflect the total number of doses for a vaccine desired by the clinic, the provider is encouraged to write "Grand Total" on the SCOF to avoid over ordering.

Due to the recent vaccine inventory limit established by the CDC, the Vaccine Program is determining providers replenishment orders based on a new following formula. Henceforth, the WyVIP program will only be ordering enough vaccine for providers to stock approximately 8 weeks worth of vaccine in their refrigerator. If you feel you need more vaccine than this for any reason please submit a Special Clinic Order Form. As always, if you have any questions please contact the Vaccine Manager, Randy DeBerry, at (307) 777-8983. Thanks.

New Staff Orientation-by Andrea Clement-Johnson

Many of you have noted or participated in the policy teleconference that has been offered the past three months. This overview is intended to make new provider staff and/or new vaccine staff designees more comfortable with the policies and expectations of the WyVIP program. Beginning this month, WIP will offer new staff orientation. This will include the policy training. Additionally, provider staff will participate in a comprehensive orientation to include a policy orientation, vaccine orientation, cold chain/storage and handling orientation, and registry orientation (if applicable). This training will be offered once per month (see calendar for dates and times, for the remainder of the year, and is intended for new staff handling WyVIP vaccine and new enrollees.

Beginning in 2009, this orientation will be a, **ANNUAL REQUIREMENT** for re-enrollment into the WyVIP program. All provider staff who receive, administer, report or monitor WyVIP vaccines will be required to participate to meet enrollment requirements. More information will follow later, but orientations are currently planned for mid through late January. Please RSVP to Andrea at least one day prior to the trainings in 2008 in order to ensure that you have the appropriate call-in information and resources.

THANK YOU!

Should I get a flu shot when I'm pregnant? By Grace Neeley

As some of you may know, I am currently in the final weeks of my first pregnancy. Being a first time mother, there are many things that I worry about and have tried my best to follow all the "rules" over the past several months. It has been my practice to get a flu shot every fall, but now that I am pregnant, I definitely do not want to get the flu.

Both the Centers for Disease Control and Prevention (CDC) and the American College of Obstetricians and Gynecologists (ACOG) recommend a flu shot for women who will be pregnant during flu season (October to mid-May). This is because pregnant women are particularly susceptible to serious illness associated with the flu, and treating the flu during pregnancy can be risky. "The antiretroviral drugs commonly prescribed to combat the flu have not been tested for safety and efficacy in pregnancy, and their effects on the fetus are unknown. Pregnant women who are using these drugs should do so with caution. Your best bet is to avoid the flu altogether, and vaccination can help you do that," says Sarah J. Kilpatrick, MD, chair of ACOG's Committee on Obstetric Practice. "Additionally, flu vaccination during pregnancy allows the woman and the fetus to develop flu-fighting antibodies, especially important because infants from 0 to 6 months cannot be vaccinated," she adds.

It is recommended that pregnant women get the flu shot as early in the season as possible, in October or November. Caregivers who offer flu vaccination should offer this at a regularly scheduled prenatal visit, or share locations where women can get vaccinated. Flu season very often peaks around February. Getting vaccinated early—in October or November—is ideal, but women can receive the vaccine throughout the flu season as long as supplies last. Women may be vaccinated throughout pregnancy with the inactivated vaccine (flu shot). The flu shot is also safe for breastfeeding women. Pregnant women should NOT use FluMist vaccine, which is inhaled instead of injected. It is only FDA-approved for use in non-pregnant individuals ages 2-49.

More resources on vaccination and pregnancy can be found at: <http://www.cdc.gov/vaccines/spec-grps/pregnant.htm>.

Upcoming Events & Trainings in Health and Immunization: By Andrea Clement-Johnson

October 8: Pentacel Clinical Training: 10:00-10:30 and 12:30-1:00. For those providers receiving Pentacel who have not already attended.

October 15: WIP Monthly Teleconference: 12:15 p.m.-1:30pm. Call in information 1-877-278-8686, Participant ID, 687555.

October 16: WIP New Vaccine staff Orientation, 8:00-11:30. Please RSVP to Andrea (307) 777-8981, by October for call in information if interested in participating, and see page 2 for more information.

October 31: 31 Days of Flu Prevention Challenge Due, all forms **MUST** be received by **5:00 p.m.** for consideration. Please fax your form to Andrea at (307) 777-3615 OR email: andrea.clement-johnson@health.wyo.gov.

Continuous Effectively Addressing Parents' Concerns about Immunizations

Web recast is available at <http://www.cdc.gov/vaccines/ed/ciinc/2008June.htm> Continuing Education credits available.

Continuous Adolescent Immunization: A focus on the Next Generation Featuring Joseph Domachowske, MD and Thad Wilson, APRN, PhD. Web recast available at <http://adolimmondemand08.haymarketmedical.com> or by phone teleconference at **1-888-696-0738**. Customer service support available at **1-866-330-7335**.



Flu Campaign Items Are Coming!-By Andrea Clement-Johnson

Hello WyVIP providers! For those offices who have submitted flu campaign item requests, please know that they should be coming to your offices in the next two weeks. The Wyoming-Based Seasonal Influenza Coalition (Wy-B-SIC) decided to go with an updated influenza prevention message this year to include:

1. Stay home when you're sick
2. Wash hands often
3. Cover your cough
4. GET IMMUNIZED!

We also have a new flu bug mascot (see picture above). We have been able to offer some of the items we have provided in the past, as well as offer some new items this year. Although we have had great demand for many items, you may still choose to submit a request. In the event we order more materials or do not use everything, we may be able to offer you some items. We also encourage you to utilize the copies of the CDC/WyVIP publications about protecting yourself from the flu and questions about influenza by making copies for your patients who come in this season. In addition, PLEASE send us any information about flu clinics you will be hosting in your clinics and communities so that we may make that information available on our website. **One more note: PLEASE plan to take part in the 30-days of Flu Prevention Effort to increase flu vaccination of healthcare workers and staff in our state! THANKS for being WyVIP providers!**

Clinical Corner-By Joanna Briggs, RN



***Public Health Nursing providers should consult with the state PHN office for final clinical direction**As school starts we get interesting questions about transfer students and what meets our state laws and ACIP recommendations.

*If a student did not start his DTaP series until after 12 months of age, he will have a completed series with three (3) doses of DTaP as long as the last dose was after the 4th birthday (school rule). Due to the late start the Tetanus rules apply, which states that three doses constitute a series (Pink Book: Page 77, next to last paragraph). "If the child was 12 months of age or older at the time that the first dose of DT was administered, three doses (third dose 6 – 12 months after the second) complete the primary DT series."

*International vaccination records are not clearly defined other than the series given needs to conform to our ACIP minimum/maximum intervals (Pink Book: Page A-8 & A-9). Many times the doses do not meet those ACIP intervals and are considered invalid; therefore, they need to be repeated. DTaP revaccination is a concern with the extra pertussis component. For that reason, we need individual medical consultation on what is safest for the child. Pink Book: Appendix B-21- 35 is a good resource to interpreting records.

*When doing vaccine entry in WyIR that involves a medical consideration or determination, it can be entered on the Demographic page by selecting Edit and entering it in the comment section. Also the Vaccination - View-Add screen for the vaccine has a comment section at the bottom. This will help to advise others of prior decisions.

Federal law requires that all immunization entries have the following fields documented: *Vaccine, date given, site, route, eligibility, manufacturer, lot number, VIS publication date, and name of staff member who administered the vaccine.* When giving the shot, the required fields are highlighted in the WyIR and need to be populated. Unfortunately, the site and route fields currently in the WyIR can not be enabled as a "required," but it is indeed required.

It was brought to our attention that **Adacel** now comes in a **different package**. Sanofi Pasteur confirmed the package change as being a goldish orange and white box with a bluish purple half moon. Of note,: On the WIP website, in the Clinical section, you will find a new document. It is called "**AFTER THE SHOT...**" This will give you help with informing parents what to expect and what to do should something occur following immunizations. ***PLEASE SEE INSERTS FOR THE "NOTES FROM THE ROAD" ARTICLE.**



Get WylR'd!
by John
Anderson

Multidose Flu Vials –

As the flu campaign once again presents itself, users of the WylR often have to handle multi-dose vials of flu vaccine, and are unsure how to enter the lot number information properly into the WylR.

In January of 2007, we presented the issue to our software vendor in their Help Desk:

“An issue arose the other day regarding how to properly record flu vaccine in the Registry for multi-dose vials. ...[W]e want to encourage providers to use the Registry as an Inventory Management tool, we need to assist them in properly recording their inventory. Our PHN contact Jackie Cushing, RN, states that when the PHN offices purchase private stock vaccine for FluZone, it can contain multiple doses that can be issued to children 6-35 months (.25 ml) and 36 & greater (.5 ml). If they record a dose currently in the Registry it assumes that it is for the full dose. Jackie's concern is that the inventory will be off since they can't record dose given but that it assumes a certain profile based upon the lot number given....”

Their response follows:

“To handle administering partial doses of flu vaccine, multiple lot number records need to be created - one lot number for each dose size, i.e. .25, .5. Then, when the vaccine is administered, the user selects the lot number for the correct age range and it decrements the correct dose amount. At this point, the system does not allow you to specify the dose size at the point of administration.”

So, to properly record it in the WylR, three lot numbers need to be entered: the “real” lot number, specifying the total .5 ml doses potentially out of the vial, along with two other lot numbers, both entered with an extension: “-.5ml” and “-.25ml.” For those lot numbers with extensions, enter the total number of potential doses out of the vial for that dose; with the .25ml lot number, simply double the number of doses that were entered for the .5ml. After the vial is emptied, reconcile those doses to the lot number without an extension, and inactivate the lot numbers with extensions. Please feel free to contact the staff with any additional questions you may have regarding this process.

DAX & Mass Immunizations

As part of our CDC requirements for pandemic flu preparedness, all of the statewide Public Health Nursing (PHN) offices have agreed to participate in the annual Doses Administered Exercise (DAX). The PHN offices will utilize the Mass Immunizations Module of the WylR to enter doses for selected flu clinics over the course of four consecutive weeks, beginning in early October. Part of the requirements for participation in the DAX is that offices need to have their immunization information entered into the WylR within 48 hours of doors closing for the selected clinic. Every year, more requirements are added to the seasonal flu campaign in order to provide us an opportunity to test our preparedness for a potential pandemic flu event. This year, we are asked to screen flu vaccine recipients for specific conditions, and enter the appropriately defined “tier” into the WylR. Participation will not only re-familiarize the PHN offices on the Mass Immunization Module, it should also allow them to analyze any potential gaps in data entry per CDC requirements. We look forward to sharing the totals with you in future months. Thanks for all of the PHN offices for working with the WIP staff to ensure preparedness in the event of a pandemic flu situation.

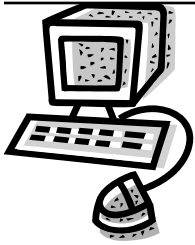
Version Upgrade – V4421!

Most likely, when users of the WylR logged on the morning of 09/24/08, they did not experience any visual change to the functionality of the WylR. That is indeed a good thing, meaning that the version upgrade that we performed that evening went quite seamlessly. In this version upgrade, some system bugs were “fixed” through coding changes, and

Change Requests that were tied to this version release were finally implemented. We will be detailing the changes on our webpage, as well as making alterations to the front page of the WyIR site. Much thanks again to Andy Yocum, our IT guru, for helping to make this happen. Please let us know what you think about the improvements – we welcome your feedback!

Laptops for WyIR Users –

Please let us know if you are interested in receiving laptops for WyIR use in your office. Most of the laptops have been upgraded to 1 G harddrive, and some have a 512 mb harddrive. All have a network card, as well as a wireless card included, offering flexibility in the utilization for your practice. Thus far, only five offices have let us know of their interest. We have approximately 8 more available, but IT is always looking at ways to upgrade more machines and make them available to the WyIR program. If you are in need, please let us know, and we will get them to you as soon as possible. Thanks in advance for your interest and participation.



WyIR Room by Lisa Wordeman

Top Vaccines Administered by WyIR Users in August 2008

The seasons are changing...and so are the passwords! I get several calls a day regarding password updates. Please do not save your WyIR password on your computer. Not only could it jeopardize the confidentiality of the WyIR, but it makes it difficult for users to remember their password, thus resulting in a lot of forgotten passwords.

I enjoyed a trip to Riverton this month. It's always nice to put faces to the voices that I speak to throughout the year. Besides the road trip, I've been doing several Bridgit trainings, including the recent Mass Immunization/DAX training. All trainings seem to be going well and we've got many WyIR "trained professionals" around the state of Wyoming.

Enjoy the color changes of the season and don't forget to call our Help Desk at 800-599-9754 if you have any questions or have any password trouble—I'm here to help!

Top Vaccines Administered by WyIR Users In August 2008

Vaccine Type	# of Doses	% of Total
Varicella	1782	10
Hep A - Ped/Adol	1600	9
DTaP	1529	9
Pneumococcal(PCV7)	1407	8
MMR	1394	8
Tdap	1276	7
IPV	1151	7
Hib	1132	7
Meningococcal Conjugate (MCV4)	1127	6
HPV	1012	6



Shining Stars!

By Lily Valdez

WyVIP thanks the following providers for submitting their **August reports** correctly and by the **2nd business day of September**.

Albany Co PHN
Alpha Family Medicine
Alpine Family Medical Clinic
Babson & Associates of Primary Care
Banner Medical Clinic
Bennett, Michele L., MD, PC
Big Horn Pediatrics
Billings Clinic - Cody
Bridger Valley Family Practice
Brown, Craig, MD
Campbell Co PHN
Carbon Co PHN-Rawlins
Carbon Co PHN-Saratoga
Casper Natrona Co Health Dept
Castle Rock Medical Center
Cedar Hills Family Clinic
Cesko Family Medicine
CHCCW
Cheyenne Children's Clinic
Cheyenne Family Medicine
Cheyenne Health & Wellness Center
Converse Co PHN
Crook Co PHN
Ellbogen, David A., MD
Emerg-A-Care
Engle, Deeanne, MD
Evanston Pediatrics
Family Care Clinic, LLC
Family First, PC
Family Medical Care
Family Medical Center
Fisher, Carol A., MD
Fremont Co Pediatric Clinic
Fremont Co PHN - Lander
Fremont Co PHN-Riverton

Fremont Family Practice
FT Washakie Health Center
Goose Creek Pediatrics
Goshen Co PHN
Granum, Michael J., MD
Green, Richard D., MD
Hot Springs Co PHN
Ivinson Memorial Hospital, Nursery
Johnson Co PHN
Lander Medical Clinic
Lander Regional Hospital
Laramie Childrens Clinic
Lincoln Co PHN-Afton
Lincoln Co PHN-Kemmerer
Michael D. Adams, MD, PC
Memorial Hospital of Carbon Co.
Memorial Hospital of Converse Co.
Memorial Hospital of Sweetwater Co.
Moorcroft Clinic
Mountain View Medical Center
Myers, Harlen, MD
Niobrara Co PHN
North Big Horn Hospital - Clinic
Park Co PHN-Cody
Park Co PHN-Powell
Pediatric and Adolescent Clinic, Inc
Platte Co PHN
Platte Co Memorial Hospital
Platte Valley Medical Clinic
Pockat, Tom, MD
Quinn, Michael J., MD-FAAP
Rawlins Family Medical
Red Rock Family Practice
Region V Boces
Riverton Community Health Center

Riverton Memorial Hospital
Sheridan Co Comm. Health
Sheridan Memorial Hospital
South Lincoln Medical Center
South Lincoln Medical Clinic
St. John's Medical Center
Star Valley Family Physicians
Star Valley Medical Center
Sublette Co PHN
Sweetwater Co Comm. Nursing Svcs-Green River
Sweetwater Co Comm. Nursing Svcs-Rock Spgs
Sweetwater Pediatrics, PC
Teton Co PHN
Thayne Family Medical Clinic
The Family Clinic, LLC
Total Family Health, PC
Tri-County Medical Center
Uinta Co PHN-Evanston
Uinta Co PHN-Lyman
Uinta Family Practice
Urgent Care of Jackson Hole
UW Family Practice
UW Student Health
Vigneri, Robert A., MD
Wagon Circle Medical Clinic
Wang, Lucase, MD
Washakie Co PHN
Western Family Care
Western Medical Associates, LLC
Weston Co PHN
Willow Creek Family Medicine
Wind River Pediatrics
Woodward, Drew, MD, PC

By submitting their monthly reports correctly and by the 2nd business day of the month for **three months**, the following providers have achieved the **Good Job! Award** (stress ball push pen). These providers are now on target for the Excellent! Award (happy highlighter).

Campbell Co Memorial Hospital
Sublette Co RHC – Big Piney
Sublette Co RHC - Pinedale

The following providers have submitted their monthly reports correctly and by the 2nd business day of the month, for **six months**, and have achieved the **Excellent! Award** (happy highlighter). These providers are now on target for the Awesome! Award (hand shape massager).

ABC Pediatrics
Arapahoe Health Center
Big Horn Basin Childrens Clinic
Big Horn Clinic
Evanston Regional Hospital
Hunter Family Medical Clinic, PC
Northeast Wyoming Pediatrics
Rock Springs Family Practice, Inc
Sweetwater Medical Group
Thomas, Jennifer, MD, PC
Women's Health Center



October 2008



Sun	Mon	Tue	Wed	Thu	Fri	Sat
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			1	2 Monthly Reports Due	3	4
5	6	7	8 Pentacel Clinical Training	9	10	11
12	13	14	15 WIP Monthly Teleconference	16 WIP Provider Orientation	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31 30 Days Flu Challenge Due	

Important Dates in October

October 2: ALL monthly reports due:

- Doses Administered Forms
- Inventory Forms
- Temperature Logs
- Special Clinic Order forms, flu doses administered, transfer of vaccine forms and/or preference forms

October 8: Pentacel Clinical Training: Please see page 3 trainings section of newsletter for more information.

October 15: WIP Monthly Teleconference: 12:15 p.m.-1:30pm.
Call in information 1-877-278-8686, Participant ID, **687555**.

October 16: WIP Provider Orientation, 8:00-11:30. Please RSVP to Andrea (307) 777-8981, by October 15 for call-in information if interested in participating, and see page 2 for more information.

October 31: 31 Days of Flu Prevention Challenge Due, all forms **MUST** be received by **5:00 p.m.** for consideration. Please fax your form to Andrea at (307) 777-3615 OR email: andrea.clement-johnson@health.wyo.gov

Some important reminders about WyVIP:

- The maximum administrative fee your office may charge for WyVIP vaccine is **\$14.31** per shot.
- Vaccine nearing expiration must be reported to our office **within 60 days of expiration**.
- An up-to-date **emergency plan** for relocating vaccine in the event of power failures must be available in your offices.
- A primary and **secondary** immunization staff contact are necessary for each office.
- All Vaccine Information Statements (VIS) must be given PRIOR to administration of any vaccine.
- Please read the WyVIP policy packet and other available policies and procedures posted at www.immunizewyoming.com



30 Days of Flu Prevention Challenge

A Healthcare Worker Influenza Vaccination Event for Advice into Action!

Dear WyVIP Provider,

As you know, the Centers for Disease Control and Prevention strongly recommends annual influenza vaccination for healthcare workers. In spite of this fact, each year, the rate for influenza vaccination among healthcare workers remains well below 40%, even though medical offices and healthcare professionals are exposed to the flu, repeatedly. This is unfortunate not only because of the impact of seasonal influenza on Wyoming's healthcare system and economy, but due to the need for flu immunization efforts to be a well-established practice for healthcare workers, well before entering into the next pandemic flu event as first responders.

During the 2008-09 flu season, we would like to see a shift in this practice and a conscious effort to make a change in Wyoming. We are offering the opportunity for your offices to take part in a unique opportunity to:

1. Promote immunization protection for your office staff
2. Serve as a model for your patients as you put flu vaccine recommendations into practice
3. Receive supplies and/or educational opportunities for making this effort!

During the 30 business days between **September 22-October 31**, all WyVIP Providers are being challenged to meet a 100% influenza vaccination rate for their office staff. **The offices as close to 100% or reaching a 100% rate for flu vaccination for their staff may receive medical or office supplies (depending on your preference) as recognition for the achievement of this goal.**

Those offices whose staff receives additional recommended vaccines during these 30 days will be eligible for consideration for the Annual Sharp Shooter Recognition Award for best immunization practices.

As always, you may choose to participate in meeting the goal, but choose not to receive supplies or entry into the recognition award. To enter into this challenge, you need only complete the on the back of this page. This form **MUST** be received by **5:00 p.m., October 31st, 2008**, for consideration. Please fax your form to Andrea at (307) 777-3615 OR email: andrea.clement-johnson@health.wyo.gov.

THANK YOU for protecting yourselves and others this flu season!

30 Days of Flu Prevention Challenge

1. **Provider office name and PIN #:** _____
2. **You Name and Title:** _____
3. **How many clinical, office, and support staff does your office employ in total?** _____

[illegible]

*Please attach additional forms as necessary

By signing this form, I declare that the information about my staff's receipt of vaccination is true and accurate to the best of my knowledge:

Signature

Date

Check here if:

 This office prefers to NOT receive supplies

 This office prefers to NOT be entered into the Sharp Shooter Annual Recognition Award





Hello WyVIP Providers,

The influenza season is almost here! We know that many of you will be hosting regular and/or mass immunization flu clinics for your patients and the public. That said, we are asking you to please complete the information below and fax or e-mail one of these forms back to our offices so that we may post the information on our website and answer any questions about where people may go to receive flu vaccines during the 2008-09 season (if multiple mass clinics are planned, please complete a form for each of these). We would like information about your flu clinics regardless of whether you are using WyVIP vaccines, private vaccines, or a combination of both. Additionally, this information is for all WyVIP providers to share, and not just those who have pre-booked vaccines with us since the intention is to **promote all flu vaccine clinics** this season. If you have any questions, please call Andrea at 777-8981 or email her at andrea.clement-johnson@health.wyo.gov. THANK YOU very much!

Clinic Name: _____ City & County: _____

Phone: _____ Contact name: _____ PIN: _____

Date of Influenza clinic (i.e. November 15, OR Every Thursday beginning with a specified date and ending with a specified date, etc.): _____

Hours of clinic operation: _____

Location of clinic (please enter full address): _____

Is this a mass clinic or a regularly occurring clinic? _____

What ages will be served at your clinic (check all that apply):

____ Babies and toddlers up to age 3 ____ Children aged 3 to 18 ____ Adults 18 and older

Is this clinic (check one): ____ Open to the public ____ Open only to your patients

Is this clinic (check one): ____ Available by- walk-in ____ Available by appointment only ____ Either

Fee for the administration of the vaccine (enter amount(s) here), i.e. \$10 for children under 18, \$30 for adults 19 and older, etc.): _____

Sliding fee scale available? ____yes ____no

Will insurance billing be available? ____yes ____no If yes, please enter the plans which will be honored for the clinic (i.e. Great West, Medicaid, any, etc.): _____

****For mass events, please complete a form for each event as they become scheduled. Please fax completed forms to 307-777-3615, attention Andrea OR email to andrea.clement-johnson@health.wyo.gov**

Key Facts About Seasonal Flu Vaccine



The single best way to protect against the flu is to get vaccinated each year.

There are two types of vaccines:

- **The "flu shot"**— an inactivated vaccine (containing killed virus) that is given with a needle, usually in the arm. The flu shot is approved for use in people older than 6 months, including healthy people and people with chronic medical conditions.
- **The nasal-spray flu vaccine** — a vaccine made with live, weakened flu viruses that do not cause the flu (sometimes called LAIV for "live attenuated influenza vaccine" or FluMist®). LAIV (FluMist®) is approved for use in healthy people 2-49 years of age who are not pregnant.

Each vaccine contains three influenza viruses-The viruses in the vaccine change each year based on international surveillance and scientists' estimations about which types and strains of viruses will circulate in a given year.

About 2 weeks after vaccination, antibodies that provide protection against influenza virus infection develop in the body.

When to Get Vaccinated

Yearly flu vaccination should begin in September or as soon as vaccine is available and continue throughout the influenza season, into December, January, and beyond. This is because the timing and duration of influenza seasons vary. While influenza outbreaks can happen as early as October, most of the time influenza activity peaks in January or later.

Who Should Get Vaccinated

In general, anyone who wants to reduce their chances of getting the flu can get vaccinated. However, it is recommended by ACIP that certain people should get vaccinated each year. They are either people who are at high risk of having serious flu complications or people who live with or care for those at high risk for serious complications. During flu seasons when vaccine supplies are limited or delayed, ACIP makes recommendations regarding priority groups for vaccination.

(OVER)→

People who should get vaccinated each year are:



1. Children aged 6 months up to their 19th birthday
2. Pregnant women
3. People 50 years of age and older
4. People of any age with certain chronic medical conditions
5. People who live in nursing homes and other long-term care facilities
6. People who live with or care for those at high risk for complications from flu, including:
 - a. Health care workers
 - b. Household contacts of persons at high risk for complications from the flu
 - c. Household contacts and out of home caregivers of children less than 6 months of age (these children are too young to be vaccinated)

Use of the Nasal Spray Flu Vaccine

Vaccination with the nasal-spray flu vaccine is always an option for healthy people 2-49 years of age who are not pregnant.

Who Should Not Be Vaccinated

There are some people who should not be vaccinated without first consulting a physician. These include:

- People who have a severe allergy to chicken eggs.
- People who have had a severe reaction to an influenza vaccination.
- People who developed [Guillain-Barré syndrome \(GBS\)](#) within 6 weeks of getting an influenza vaccine.
- Children less than 6 months of age (influenza vaccine is not approved for this age group), and
- People who have a moderate-to-severe illness with a fever (they should wait until they recover to get vaccinated.)

Vaccine Effectiveness

The ability of flu vaccine to protect a person depends on the age and health status of the person getting the vaccine, and the similarity or "match" between the virus strains in the vaccine and those in circulation. Testing has shown that both the flu shot and the nasal-spray vaccine are effective at preventing the flu. Ask your healthcare provider about what to expect after you have been vaccinated.

The Wyoming Vaccinates Important People (WyVIP) Program provides flu vaccination, to ALL children from 6 months to the day before the 19th birthday, to participating providers. For information about locating a WyVIP provider or to find out more about seasonal influenza, please visit our website at www.immunizewyoming.com or visit the Centers for Disease Control and Prevention website at www.cdc.gov.



QUESTIONS & ANSWERS

Preventing Seasonal Flu

What can I do to protect myself against the flu?

By far, the single best way to prevent the flu is for individuals, especially people at high risk for serious complications from the flu, to get a vaccination each fall. To learn more, see [Key Facts about Flu Vaccine](#).

What are other steps that can be taken to prevent the flu?

There are other good health habits that can help prevent the flu. These are:

- Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.
- If possible, stay home from work, school, and errands when you are sick. You will help prevent others from catching your illness.
- Cover your mouth and nose with a tissue or sleeve when coughing or sneezing. It may prevent those around you from getting sick.
- Washing your hands often will help protect you from germs.
- Avoid touching your eyes, nose or mouth. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.

What kills influenza virus?

Influenza virus is destroyed by heat (167-212°F [75-100°C]). In addition, several chemical germicides, including chlorine, hydrogen peroxide, detergents (soap), iodophors (iodine-based antiseptics), and alcohols are effective against influenza viruses if used in proper concentration for sufficient length of time. For example, wipes or gels with alcohol in them can be used to clean hands. The gels should be rubbed until they are dry.

The Wyoming Vaccinates Important People (WyVIP) Program provides flu vaccination to ALL children, from 6 months to the day before the 19th birthday, to participating providers. For information about locating a WyVIP provider or to find out more about seasonal influenza, please visit our website at www.immunizewyoming.com or visit the Centers for Disease Control and Prevention website at www.cdc.gov.

WIP RELEVANT CONTACTS

Wyoming Department of Health
Community Health Division
6101 Yellowstone Rd., Ste. 420
Cheyenne, WY 82002
Main Line: (307) 777-7952 Fax: (307) 777-3615
www.immunizewyoming.com

WIP Administration	Vaccine Program
<p>Jan Bloom, M.S. Section Chief 307-777-6001 jan.bloom@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> Program comments/complaints <p>Karoleigh Cassel Administrative Specialist 307-777-7621 karoleigh.cassel@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> To be transferred to the appropriate WIP staff member To request, verify receipt or processing of the following: <ul style="list-style-type: none"> Literature/material order requests School nurse registry enrollment packet Flu marketing materials Flu clinic website registration forms Website questions 	<p>Randy DeBerry, M.A. Vaccine Program Manager 307-777-8983 307-631-1480 cell randy.deberry@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> WyVIP vaccine program comments/complaints Staff comments/complaints Questions from the public regarding WyVIP vaccine supply or availability Flu allocations Vaccine Order Inquiries <p>Lily Valdez Provider Relations Administrative Assistant 307-777-8503 lily.valdez@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> Order Confirmation Faxed to Providers WyVIP Enrollment Packets requests WyVIP Policy and Procedure Packets requests WyVIP Provider Agreement requests WyVIP Policies and Procedures, including: <ul style="list-style-type: none"> Incentive Program Withdrawal from WyVIP Program Reporting Requirements
Wyoming Immunization Registry (WylR) Program	Clinical Services
<p>John Anderson, M.A. Wyoming Immunization Registry Manager 800-599-9754 307-777-5773 cell john.anderson@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> WylR general questions WylR program comments/complaints WylR staff comments/complaints 	<p>Joanna Briggs, RN Clinical Coordinator/AFIX Coordinator 23 N. Scott, Ste 14 Sheridan, WY 82801 307-673-8930 307-214-7905 cell 307-673-5368 fax joanna.briggs@health.wyo.gov</p> <ul style="list-style-type: none"> WyVIP Approved Vaccine Schedules ACIP Recommended Schedules Storage, Handling/Cold Chain Questions Dosing by Vaccine Brand/Type Vaccine Adverse Events Annual Site Visits <p>For all PHN clinical and cold chain questions & issues, please contact:</p> <p>Tom Henry, RN PHN Program Specialist 510 S. 15th Street Worland, WY 82401 307-347-3001 tom.henry@health.wyo.gov * Adult Immunization questions</p> <p>Lisa Lucas, RN PHN Program Specialist 307-777-7383 lisa.lucas@health.wyo.gov * Childhood Immunization questions</p>
<p>Lisa Wordeman, B.S. WylR Registry Trainer 307-777-2413 307-256-0503 cell lisa.wordeman@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> WylR technical questions WylR training questions <p>Lola Wolfe Advantage Visit & Registry Data Clerk 307-777-1919 lola.wolfe@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> Data entry of Registry Records CoCASA Reporting Support 	<h3>Health Education & Outreach Program</h3> <p>Andrea Clement-Johnson, M.S., Ed. Education & Outreach Manager 307-777-8981 307-631-8089 cell andrea.clement-johnson@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none"> Educational Requests/Questions Program comments/complaints Policy, Enrollment and Eligibility questions Teleconference information <p>Grace Neeley Education & Outreach Specialist- Cheyenne Office 307-777-8982 307-256-0504 cell grace.neeley@health.wyo.gov Contact Grace for the following:</p> <ul style="list-style-type: none"> 2008 Outreach Visits
Wyoming EqualityCare (Medicare)	Vaccine Manufacturers
<p>Sheree L. Nall Provider Services Manager 307-777-8756 sheree.nall@health.wyo.gov</p> <p>Angela DeBerry Provider Services Manager 307-777-7257 angela.deberry@health.wyo.gov</p> <p>Contact for the following:</p> <ul style="list-style-type: none"> EqualityCare (Medicaid) billing questions CPT Coding 	<p>GlaxoSmithKline 833-475-8222 www.gsk.com Lawless Barrientos 303-877-0929</p> <p>Sanofi Pasteur 800-822-2463 vaccineshoppe.com Frank John 719-481-5983</p> <p>Merck 800-637-2579 www.merck.com Kathy Parrish 303-973-1615</p> <p>Wyeth/Lederle 800-572-8227 Andrew J. Gess (512) 663-2423 (888) 685-5961, ext. 78471 gessa@wyeth.com</p>

"Notes from the Road"

October 2008

By Joanna Briggs, R.N. Clinical Coordinator/AFIX Coordinator

"2007 National Immunization Survey Results"

The 2007 National Immunization Survey data was released in early September. These data reflect coverage rates for children between 19 and 35 months old. These data reflect coverage rates for children born in 2005.

2007 NIS	Wyoming	Nationally	Position – out of 51
4-3-1-3-3-1	70%	77%	45 th
4-3-1-3-3-1-4	59%	67%	45 th
4 or more DTap	79%	85%	47 th /48 th
3 or more Hep B	91%	93%	42 nd
3 or more Hib	86%	93%	50 th
4 or more PCV7	68%	75%	44 th
MMR	88%	92%	49 th
3 or more IPV	91%	93%	37 th /38 th
Varicella	79%	90%	48 th /49 th

During 2005, many factors adversely affected the rates reported in the 2007 National Immunization Survey, including:

1. Wyoming was not considered a "universal" state in 2005.
2. Providers were required to use private stock and insurance was billed (if a policy existed with the child's name on it) during a portion of the year.
3. Vaccine eligibility interpretations were changed.
4. Supply impacts:
 - a. VFC allocation allowed for 60% of children covered, 317 Funds accounted for 5% - leaving 35% in need of private stock.
 - b. Manufacturers were not keeping up with demand, and there were limited doses of vaccine available (e.g. PCV7 was in limited supply).
5. Parents did not want to pay for immunizations when they discovered that the state was coming up with funding to enable "free vaccine" to be made available once again.

The Wyoming Immunization Program is optimistic that the rates reported in the 2008 National Immunization Survey will be an improvement over the 2007 rates.

"Helpful Hints"

- Designate a specific vaccine administration site and for each vaccine, for example, DtaP will always be administered in the right arm.
- Use the Wyoming Immunization Registry (WylR) as a tool for forecasting necessary/recommended vaccines. The ACIP schedules are continually updated in the WylR.
- Use the WylR inventory at the end of the month to verify against the refrigerator supply and count in the refrigerator.
- The green Wyoming Vaccine Administration Form is not required by WIP when using the WylR.
 - Remember: You have a doctor's order with the vaccines to be administered already in the chart.
- Enter WylR data immediately after vaccines are administered, whenever possible.
 - If you are unable to log in right away, use a "baggie" to place empty vials and paper clip to your chart until it is loaded into the registry.

- Enter vaccinations before leaving for the day, and only then discard empty vials into the baggies.
- When using Wyoming Vaccine Administration Form, make labels if one is not provided by the manufacturer, to tape to your record. Make the label to indicate site, manufacture, lot number, VIS date, and duplicate for the number of doses in your shipment. Change the font to fit the form. This may be helpful for mass clinics when you don't have time to hand write this information and transpositions can occur. Avery labels work well for this. Cut the labels between entries and tear off as needed. Post on a small cork board near the refrigerator and then match to the bottles you retrieved from the refrigerator.

Example:

DTaP	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07
	LT	GSK	AC148005AA	5/17/07

THERMOMETER AND COLD CHAIN ISSUES:

- There should be two types of thermometers (example: digital; fluid filled; continuous read; etc.) in each refrigerator and each freezer that store vaccines.
- The certifications for the Fisher Scientific (digital) thermometers are starting to expire. This expiration date is noted on a sticker on the back of the unit. In the event you are experiencing variations and "strange readings" from these units, check the battery. PLEASE CHANGE ALL BATTERIES IN THE DIGITAL THERMOMETERS NOW.
- The pipette in the refrigerator is certified as long as it is not broken and the green line in the pipette is not separated. (There are instructions with the pipette to fix a broken green line if this occurs. The break in the green line happens when the thermometer is not kept upright.)
- When recording thermometer temperatures, please write down the pipette thermometer and check the temperature against the digital thermometer.** These readings need to be within $\pm 1^{\circ}\text{C}$. Read and clear the Minimum/Maximum indicator to determine the range of the unit since you last recorded your temperatures.
- Thermometers should not be attached to the inside wall of the refrigerator or freezer. These must be centered and upright on the middle rack of each unit.
- Fill freezer units half-full with ice packs and place water bottles in the refrigerator. Both ice packs and water bottles help to maintain the temperature when electrical outages occur. The amount of ice packs or water bottles needed depends on vaccine volume.
- Please review the cold chain policy in the Tool Kit for further direction.**

"WyVIP Eligibility"

Eligibility screening is outlined in the annual enrollment paperwork. As a reminder...

Wyoming Resident-Patients must meet the following criteria and are eligible for vaccine based on the eligibility chart below and Vaccine Currently Available:

- Definition: The Wyoming Immunization Program defines a Wyoming resident as a child of a parent/legal guardian who has a physical Wyoming address listed in their medical record.

- ii. Residency Verification: The Wyoming Immunization Program DOES NOT require proof (driver's license, utility bill, voter registration) of physical address.

Non-Wyoming Resident-Patients must meet the following criteria and are eligible for VFC vaccine based on the eligibility and Vaccine Currently Available:

- i. Medicaid Enrolled (or qualified through a State Medicaid waiver), or
- ii. No health insurance, or
- iii. American Indian or Alaskan Native (as defined by the Indian Health Services Act), or
- iv. Underinsured as defined by:
 - 1. Insurance plan does not cover immunizations, or
 - 2. Insurance plan does not cover specific vaccine antigens (child will only be WyVIP eligible for antigens that are not covered), or
 - 3. Maximum immunization benefit has been exceeded within the benefit year.
 - 4. Non-resident children are INELIGIBLE for WyVIP vaccine if they have:
 - a. A copay, and/or
 - b. Not met their deductible, regardless of the deductible amount.

Classification	Wyoming Resident	Wyoming Non-Resident
Medicaid Enrolled	Eligible	Eligible
No Insurance	Eligible	Eligible
Native American/Alaskan Native	Eligible	Eligible
Underinsured	Eligible	Eligible Only at RHC/FQHC
Insured	Eligible	** Non-Eligible
KidCare	Eligible	**N/A

**Non-Resident insured patients can only receive vaccine from your privately purchased stock of vaccine.

ROTAVIRUS VACCINE

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 What is rotavirus?

Rotavirus is a virus that causes severe diarrhea, mostly in babies and young children. It is often accompanied by vomiting and fever.

Rotavirus is not the only cause of severe diarrhea, but it is one of the most serious. Before rotavirus vaccine was used, rotavirus was responsible for:

- more than 400,000 doctor visits,
- more than 200,000 emergency room visits,
- 55,000 to 70,000 hospitalizations, and
- 20-60 deaths

in the United States each year.

Almost all children in the U.S. are infected with rotavirus before their 5th birthday.

Children are most likely to get rotavirus diarrhea between November and May, depending on the part of the country.

Your baby can become infected by being around other children who have rotavirus diarrhea.

2 Rotavirus vaccine

Better hygiene and sanitation have not reduced rotavirus diarrhea very much in the United States. The best way to protect your baby is with rotavirus vaccine.

Rotavirus vaccine is an oral (swallowed) vaccine, not a shot.

Rotavirus vaccine will not prevent diarrhea or vomiting caused by other germs, but it is very good at preventing diarrhea and vomiting caused by rotavirus. Most babies who get the vaccine will not get rotavirus diarrhea at all, and almost all of them will be protected from *severe* rotavirus diarrhea.

Babies who get the vaccine are also much less likely to be hospitalized or to see a doctor because of rotavirus diarrhea.



3 Who should get rotavirus vaccine and when?

There are two brands of rotavirus vaccine. A baby should get either 2 or 3 doses, depending on which brand is used.

The doses are recommended at these ages:

First Dose: 2 months of age

Second Dose: 4 months of age

Third Dose: 6 months of age (if needed)

The first dose may be given as early as 6 weeks of age, and should be given by age 14 weeks 6 days.

The last dose should be given by 8 months of age.

Rotavirus vaccine may be given at the same time as other childhood vaccines.

Babies who get the vaccine may be fed normally afterward.

4 Some babies should not get rotavirus vaccine or should wait

- A baby who has had a severe (life-threatening) allergic reaction to a dose of rotavirus vaccine should not get another dose. A baby who has a severe (life threatening) allergy to any component of rotavirus vaccine should not get the vaccine. Tell your doctor if your baby has any severe allergies that you know of, including a severe allergy to latex.
- Babies who are moderately or severely ill at the time the vaccination is scheduled should probably wait until they recover. This includes babies who have moderate or severe diarrhea or vomiting. Ask your doctor or nurse. Babies with mild illnesses should usually get the vaccine.

- Check with your doctor if your baby's immune system is weakened because of:
 - HIV/AIDS, or any other disease that affects the immune system
 - treatment with drugs such as long-term steroids
 - cancer, or cancer treatment with x-rays or drugs

In the late 1990s a different type of rotavirus vaccine was used. This vaccine was found to be associated with an uncommon type of bowel obstruction called "intussusception," and it was taken off the market.

The new rotavirus vaccines have not been associated with intussusception.

However, babies who have had intussusception, from any cause, are at higher risk for getting it again. If your baby has ever had intussusception, discuss this with your doctor.

5 What are the risks from rotavirus vaccine?

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of any vaccine causing serious harm, or death, is extremely small.

Most babies who get rotavirus vaccine do not have any problems with it.

Mild problems

Babies may be slightly more likely to be irritable, or to have mild, temporary diarrhea or vomiting after getting a dose of rotavirus vaccine than babies who did not get the vaccine.

Rotavirus vaccine does not appear to cause any serious side effects.

If rare reactions occur with any new product, they may not be identified until thousands, or millions, of people have used it. Like all vaccines, rotavirus vaccine will continue to be monitored for unusual or severe problems.

Vaccine Information Statement (Interim)
Rotavirus (8/28/08)

6 What if there is a moderate or severe reaction?

What should I look for?

- Any unusual condition, such as a high fever or behavior changes. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- **Call** a doctor, or get the person to a doctor right away.
- **Tell** your doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.

Or you can file this report through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not provide medical advice.

7 The National Vaccine Injury Compensation Program

A federal program has been created to help people who may have been harmed by a vaccine.

For details about the National Vaccine Injury Compensation Program, call 1-800-338-2382 or visit their website at www.hrsa.gov/vaccinecompensation.

8 How can I learn more?

- Ask your doctor or nurse. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO)
 - Visit CDC's National Immunization Program website at: www.cdc.gov/vaccines



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

A reminder about VFC eligibility:

Recently, there have been reports about confusion over Wyoming residency status and VFC eligibility status for children to receive WyVIP vaccines.

As noted in the WIP Policy Packet, ALL children of Wyoming residents (those children whose parents have a Wyoming address listed in their records) are eligible to receive WyVIP vaccines. With the implementation of the Childhood Immunization Act of 2006, the WyVIP program has been capable of providing vaccines to ALL children in Wyoming, regardless of income or insurance status, through a combination of federal and state monies.

Those children who come into provider offices who are non-residents of Wyoming, who are Vaccines For Children (VFC) eligible, that is, Native American/Alaskan Native, Medicaid Enrolled, without health insurance, or those who meet the classification of underinsured (please see the eligibility packet for guidance) are still eligible to receive WyVIP vaccines as part of the VFC-entitlement program, for which we receive federal funds. For more information and guidance, please also note the Notes from the Road insert by Joanna Briggs, RN, or review the Eligibility, Enrollment, and Policy Packets available on our website at www.immunizewyoming.com.

Thank you!